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Bib Data Sheet

CONFIRMATION NO. 6231

<b>SERIAL NUMBER</b> 09/998,536	<b>FILING DATE</b> 11/28/2001 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2675	<b>ATTORNEY DOCKET NO.</b> P-7109.03 C1
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*** 09/063.227 4/20/1998  
~~THIS APPLICATION IS A CON OF 09/063,277 04/21/1998 PAT 6,154,182 \*~~  
 (\*) Data inconsistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
 \*\* 01/02/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: _____ Initials: _____	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 5
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**ADDRESS**

Kenneth J. Collier  
Medtronic, Inc.  
710 Medtronic Parkway  
Minneapolis, MN 55432-5604

**TITLE**

Medical electrical leads and indwelling catheters with enhanced biocompatibility and biostability

<b>FILING FEE RECEIVED</b> 908	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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